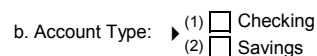


2002
MI-1040CR

Attachment Sequence No. 05

32. Multiply line 31 by 60% (.60) (maximum \$1,200). Go to line 35	32.	_____	.00
33. FIP/FIA recipients , complete lines 50-53 and enter amount from line 53 here. Seniors who pay rent , complete lines 54-58 and enter amount from line 58 here (maximum \$1,200). Go to line 35	33.	_____	.00
34. Senior homeowners or anyone who checked a box on line 6 (if you completed line 33, skip this line), enter the amount from line 31 (maximum \$1,200). Go to line 35	34.	_____	.00
35. CREDIT . If your household income (line 29) is less than \$73,650, enter the amount that applies to you from line 32, 33 or 34 here. If it is more than \$73,650, you must reduce your credit (see instructions on page 22). If you file an MI-1040, carry this amount to your MI-1040, line 30	▶ 35.	_____	.00



PART 1: HOMEOWNERS. Report on lines 36 and 37 the addresses of the homesteads you are claiming credit on.

36. Address of where you lived on December 31, 2002, if different than reported on line 1.	Taxable Value
37. Address of homestead sold during 2002 (No., street and city).	Taxable Value

If you bought or sold your home in 2002, complete lines 38-42.

HOMESTEAD:

A. Bought

B. Sold

38. Number of days occupied. (Total cannot be more than 365.)	38.		
39. Divide line 38 by 365 and enter percentage here	39.	%	%
40. Property taxes levied in calendar year 2002	40.		
41. Prorated taxes. Multiply line 40 by percentage on line 39	41.		
42. Taxes eligible for credit. Add line 41, columns A and B. Enter here and on line 8	42.		.00

PART 2: RENTERS

43. Address of Homestead You Rented (No., Street, Apt. #, City)	Landowner's Name and Address	No. of Months Rented	Monthly Rent	Total Rent Paid
A.				A.
B.				B.

44. Total rent paid (not more than 12 months). Add total rent for each period. Enter here and on line 9 44.00

PART 3: OCCUPANTS OF HOUSING ON WHICH SERVICE FEES ARE PAID INSTEAD OF TAXES

45. Name and Address of Housing Project or Landowner
46. Enter the total rent you paid in 2002. Do not include amounts paid on your behalf by a government agency..... 46.00
47. Multiply line 46 by 10% (.10). Enter here and on line 8 47.00

PART 4: OCCUPANTS OF NURSING OR ADULT FOSTER CARE HOMES OR HOMES FOR THE AGED

48. Name and Address of Care Facility
49. Your share of taxes paid by the landowner (see page 19). Enter here and on line 8 49.00

PART 5: CREDIT PRORATION. Complete if you received FIP/FIA benefits.

50. Subtract line 24 from line 29 and enter here	50.	.00
51. Divide line 50 by line 29 and enter percentage here	51.	%
52. If you checked a box for 65 or older or checked any box on line 6, enter the amount from line 31. All others, multiply amount on line 31 by 60% (.60) and enter here (maximum \$1,200)	52.	.00
53. Multiply line 52 by percentage on line 51. If you are age 65 or older and you rent your home, enter here and on line 54 and complete lines 55-58. Otherwise, enter here and on line 33	53.	.00

PART 6: ALTERNATE PROPERTY TAX CREDIT FOR RENTERS AGE 65 AND OLDER

54. Enter amount from line 31 or from line 53	54.	.00
55. Enter rent paid from line 44 or line 46. (If you moved during 2002, see instructions, page 19.)	55.	.00
56. Multiply the amount on line 29 by 40% (.40) and enter here	56.	.00
57. Subtract line 56 from line 55. If line 56 is more than line 55, enter "0"	57.	.00
58. Enter the larger of line 54 or line 57 and carry this amount to line 33	58.	.00

**Deceased
Taxpayers**If filer is deceased, enter
date of death.

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If spouse is deceased,
enter date of death.

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I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge.		I declare under penalty of perjury that this return is based on all information of which I have any knowledge.	
<input type="checkbox"/> I authorize Treasury to discuss my return with my preparer. <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Preparer's SSN, PTIN or FEIN	
Filer's Signature	Date	<input type="checkbox"/> Preparer's Name and Address	
Spouse's Signature	Date		